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The Health of Andover

Annual Report of the
Medical Officer of Health
1954


THE HEALTH OF ANDOVER

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

1954.



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BOROUGH OF ANDOVER

1954

Mayor

Councillor P.H. Ponting

PUBLIC HEALTH COMMITTEE

Chairman

Alderman W.J. Ponting

Members

His Worship the Mayor	
Alderman Mrs. O.H.K. Harvey	(Resigned 22.7.54.)
Councillor Mrs. M.M. Sainsbury	(Died June, 1954.)
Councillor G.D. Simpson	
Councillor J.W.E. Tait	
Councillor W.J. Jackson	
Councillor R.F. Cox	
Councillor J. Haines	(Appointed 3.8.54.)

STAFF

Medical Officer of Health

F. H. M. Dummer, M.B., Ch.B.(St.And.), D.P.H.(Lond.).

Chief Sanitary Inspector & Borough Shops Acts Inspector

A. R. Tarrant, M.R.San.I., M.S.I.A.

Additional Sanitary Inspector

R. K. Crow, M.R.San.I., M.S.I.A., M.R.I.P.H.H.

Medical Officer of Health's Secretary

Miss M. B. Lowman.

Clerks

Miss J. J. Ford (Resigned April)

Mrs. M. J. Wilson

Miss V. A. Curtis

OUTDOOR STAFF

Rodent Operator

A. Prosser.

General Assistant (Part-time Rodent Work)

G. Maunders (Died October)

(Temporary staff employed for remainder of year.)

BOROUGH OF ANDOVER
PUBLIC HEALTH DEPARTMENT

To His Worship the Mayor,

June, 1955.

Aldermen and Councillors of the Borough of Andover:

Mr. Mayor, Gentlemen,

I have the honour to present my second Annual Report as your Medical Officer of Health.

Throughout the pages which follow, you will read something of the work which your Public Health Department, in conjunction with other related Departments of the Council, is doing to maintain the health and education of the public. I stress this latter educational aspect of our work, because it is by making people aware of the higher standards which can be achieved, that communal well-being will be advanced. This is essentially a slow and gradual process but we are planning not so much for our immediate requirements, but just a bit ahead of that aim.

The stage we have reached at the present time represents a remarkable milestone of progress when we compare it with the situation existing twenty years ago - a short period in the life of a community. In 1933, there were 67 cases of diphtheria notified, the main infectious disease in that year. Today with a core of resistance to the disease, built up through immunisation in an enlightened people, diphtheria is a rarity indeed - but it will only remain a rarity as long as the bulwark is maintained.

Twenty years ago, 76 premises were inspected for verminous infestation, other than rats and mice. In 1954 the figure was 5. A small circumstance you may think, but what a change in standard lies behind those figures. In other ways too, such as housing improvement grants, infant welfare, cleaner water, more hygienic food handling, the people are being given the facilities for healthier and happier lives.

There is a stage however, beyond which no official action can go - the next step is public demand. In this respect it is remarkable that the most prevalent disease in the world has met with very little clamour for eradication - dental disease. It is true that we have such agents as the school dental service and the facilities available under the provisions of the National Health Service Act. But in my schools and clinics, I see very little evidence of marked improvement in the dental condition of children.

Tooth-brushing, and possibly restriction in the consumption of concentrated sugar, can never be discarded in favour of other more dramatic agents. But these in themselves do not seem to have gone very far in solving this problem of prevalent dental caries. What we need is a measure, which without trouble to the community, will exert a gradual beneficial influence on the dentition of the child so that each generation will show an increasing number of **dentally healthy citizens**. The solution is not as academic or as idealistic as was once thought. We know now that the addition of fluorides to the public water supply will reduce the incidence of dental caries.

These substances are as cheap, as reliable, as harmless as those used today in chlorination - a measure which has rendered safe your water supply for decades. This is a fact which we would do well to use to our advantage as soon as we can.

One of the most remarkable advances of the last fifteen years has been the almost dramatic decrease in mortality due to tuberculosis. There has not however, been anything like the same decrease in the number of new cases being notified. You will see from the section on tuberculosis in this Report, that the number of new cases remains at the same level as last year. It may be that the increasing use of mass radiography has brought to light hitherto undiscovered sources of infection, but the fact remains that tuberculosis is an infectious disease which is very seriously influenced by the environmental conditions under which the people live.

New drugs and BCG go a long way towards the elimination of this disease, but housing standards, prevention of over-crowding, modern sanitation, and health education remain in the fore-front of our preventive measures. The accent is still on prevention which even from the purely economic view point, remains the cheapest and most effective way of ensuring that deep inroads are not made in the main wage earning section of the population - that section on which tuberculosis bears most heavily.

In the preparation of this Report I have had assistance from many of your officials. A great deal of the information contained here has been given by the Chief Sanitary Inspector. As I said in last year's Report, one would not expect the work of Sanitary Inspectors to be spectacular, but it is nevertheless one of the mainstays reflecting the standard of living of the community, and I acknowledge my indebtedness to the vigilance and enthusiasm with which Mr. Tarrant and Mr. Crow have carried out their duties during the year. The Borough Surveyor, Mr. R.S. Offord, B.Sc., D.P.A., A.M.Inst.C.E., and the Housing Manager, Mr. W.G. Bryden, A.I.Hsg., A.R.San.I., have also provided material for the Report, and I am very pleased to acknowledge the continued support I have had from these officers.

I am grateful too, for the excellent work done by my secretary, Miss M.B. Lowman, particularly in connection with the increasing range of her work which has been occasioned by my duties undertaken on behalf of the County Council.

The Department has been fortunate in having a Public Health Committee which has on numerous occasions shown its interest in the work, and I am grateful to all members both of the Committee and of the Council for their kindness to myself and to my staff.

I am, Mr. Mayor,

Gentlemen,

Your obedient Servant,

J. H. M. Dummer

Medical Officer of Health.

General Statistics

Area (in acres)	6,381	(6,381)
Registrar General's estimate of mid-year population	15,600	(15,440)
1951 Census figure	14,661	
Number of inhabited houses	4,251	(4,087)
Rateable value	£113,297	(£109,714)
Sum represented by penny rate	£450	(£438)

The Registrar General's estimate of the population of this town at the end of June, 1954, was 15,600, a net gain of 160 over the estimate for 1953.

The population trend of Andover is as follows:-

1947	13,560	1951	15,390
1948	13,860	1952	15,430
1949	15,260	1953	15,440
1950	15,050	1954	15,600

From the viewpoint of area, Andover lends itself to the accommodation of a much higher population than is at present the case. While one would not wish to emulate the example of the congested industrial cities, it is an unassailable fact that there could be a major development of Andover well within its present geographical limits.

Vital Statistics

	<u>Births</u>	
	<u>Male</u>	<u>Female</u>
Total	130	95
Legitimate	121	94
Illegitimate	9	1

	<u>Birth Rate</u>	
	<u>Andover Municipal Borough</u>	<u>England & Wales</u>
Live Births	14.4	15.2
Still Births	17.4	23.4

	<u>Deaths (All Causes)</u>	
	<u>Male</u>	<u>Female</u>
Total	89	86

	<u>Death Rate</u>	
	<u>Andover Municipal Borough</u>	<u>England & Wales</u>
All Causes	11.2	11.3
Comparability Factor	0.96	
Corrected Rate	10.75	

	<u>Infant Mortality</u>	
	<u>Andover Municipal Borough</u>	<u>England & Wales</u>
	35.1	25.5

	<u>Neonatal Mortality</u>	
	<u>Andover Municipal Borough</u>	<u>England & Wales</u>
	31.1	17.7

(The Birth and Death Rates are calculated per 1000 of the population.
The Infantile Mortality Rate is calculated per 1000 live births.)

The Death Rate

The local death rate for 1954 was 11.2 per 1,000, a decrease of 0.9 on last year's figures and 0.1 below the national average.

The main cause of death - an expected finding - was heart disease which accounted for nearly 42% of the total. This is an increase of 2% on the 1953 figure, and it is an estimate in which there can be little likelihood of improvement, faced as we are with an ageing population. There is no prospect of a "penicillin-magic" about old age. Within this figure however, representing heart disease, there are instances of such fatalities as coronary thrombosis at the relatively early age of 50 - 60, where future research may yet find an answer in warding off the blow. Even more remarkable advances in medical science were once thought fantastic and impossible.

Cancer deaths amounted to 13% of all deaths, a welcome decrease of 7% on last year. The same number of people - 4 - died of cancer of the lung, but whereas in 1954 all were males, this year the figure was equally shared. No statistical significance can be deduced from such a small figure, but it is surprising that there was not a male predominance in deaths from lung cancer, where the national figures show that the rate is approximately 6.1.

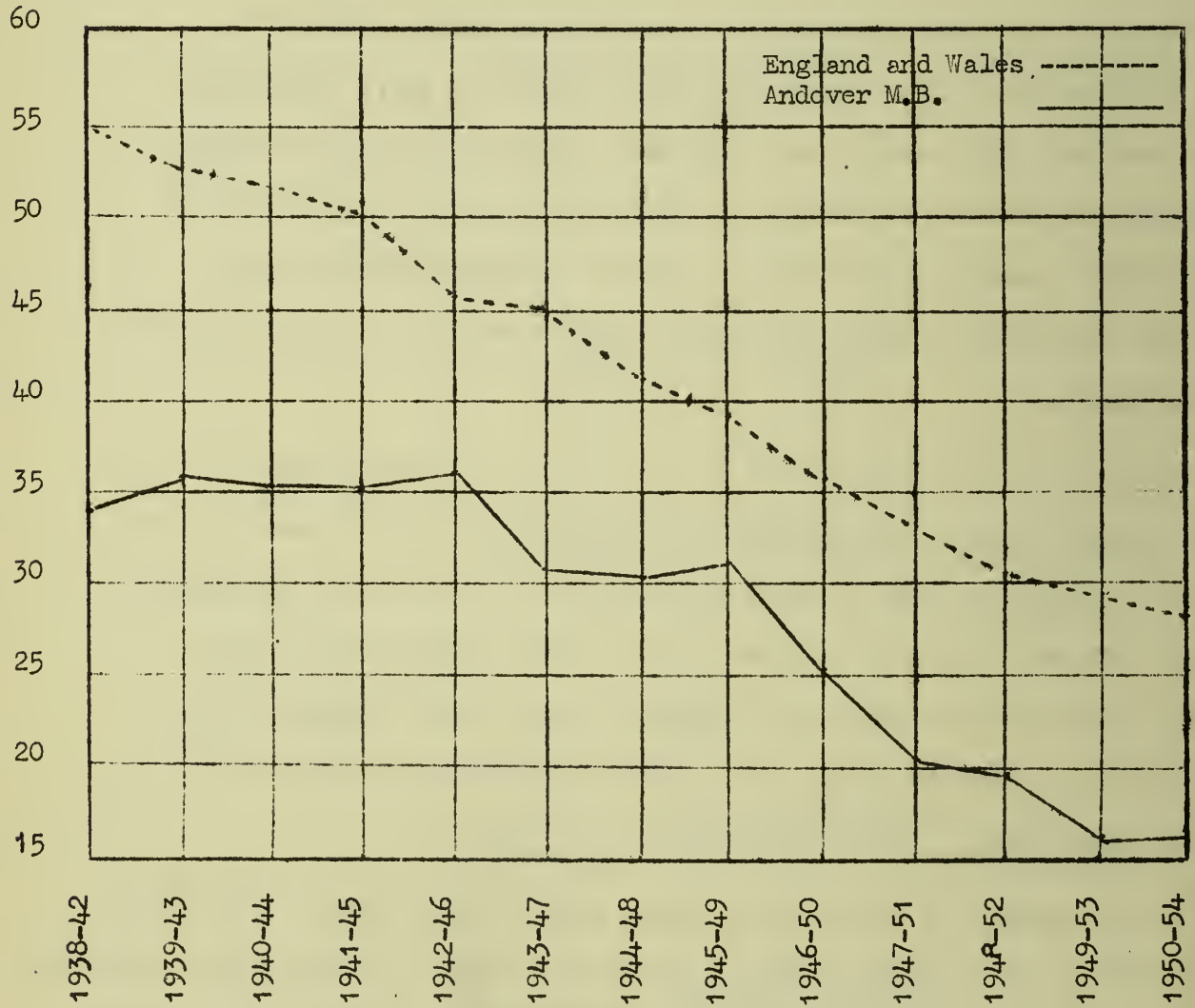
In the section on infectious diseases mainly associated with childhood, one child died from whooping cough. No death occurred in pregnancy or childbirth. The average age at death for Andover was 58.5 for males and 52.8 for females. This is well below the national average for either sex, but is partly accounted for by the fact that an unusually high number of premature births this year resulted in early deaths.

Eight infants died this year under the age of twelve months.

Five of these were premature infants and died under the age of four weeks.

These figures give an unusually high infant mortality rate of 35.1 for Andover as compared with the national rate of 25.5.

INFANTILE MORTALITY (QUINQUENNIAL)



The real trend of infant mortality cannot be seen by choosing a particular year, and the fore-going graph gives a truer picture of the real tendency as shown in five yearly periods. It will be seen from the graph that there has been a very steady decline in the national rate and the satisfactory point as far as Andover is concerned is that the town's rate is well below that of England and Wales taken over those same five yearly periods.

The question of birth injuries does not enter into the picture nearly as largely as once was the case, only one of the infants dying from this cause. Prematurity continues to be a problem, and is not one to which there is any easy solution. The birth weight standard of $5\frac{1}{2}$ lbs. or less is taken as the classification of premature birth. The chances of survival, death occurring within twenty-four hours relatively commonly in infants below 4 lbs., vary very considerably with a birth rate in the range of under 3lbs. to over 5lbs.

Infectious Diseases

1954 was not a dominant year in measles, only two cases being notified.

The trend of the disease is shown in the following table:-

1954	2	1952	1	1950	4	1948	6
1953	237	1951	241	1949	186	1947	78

The two-yearly cycle is well discerned. Although measles is not of such significance as a killer these days, one must never forget some of the serious sequelae of an attack of this deceptive disease, e.g. vision defects, ear trouble, dental caries. One sees the result of measles in the inspection of school children, and there is no doubt in my mind that a quick follow-up of these cases would, if not prevent, at least enable early treatment to be instituted and save a considerable amount of future ill-health.

The number of cases of whooping cough, 36, was relatively small this year, but the disease is none the less important for that fact. Today whooping cough is one of the most dangerous infectious diseases of infancy and childhood, although it is true that remarkable improvement has been made in reducing mortality. One tremendous advance has been the introduction of an anti-pertussis vaccine, which, although its use is not as wide-spread as it should be, is becoming more and more to be looked upon as a normal preventive measure in infancy.

Taken as a whole 1954 produced relatively few notifications of infectious diseases. It should not be thought however, that other infectious diseases, not notifiable, remained dormant. Mumps and chickenpox, various forms of tonsillitis, the common cold and many respiratory illnesses, all took their toll in absence from work and school, and incapacity over a considerable period.

Individual measures such as early isolation, are still as important as ever, and the general level of community health in this respect, is largely governed by the commonsense of people who are able and willing to recognise the harm that can be done by bravado. The child at school with eyes and nose streaming from the signs of the common cold, the industrial worker who "carries on" with a sore throat, the shop girl who sneezes over the bacon slicing machine (or more important, the pre-cooked foods contraption), the typist who bravely sits and shivers in the first stages of influenza - all these people constitute a menace to the public at large, a menace which can be largely obviated by a little thought and consideration.

There were five cases of scarlet fever notified throughout the year. These were of a mild nature and gave no cause for alarm. The incidence of scarlet fever throughout the country has been surprisingly high, but the Borough figure at 0.31 per 1,000 of the population compares favourably with the national figure of 0.97 per 1,000. Scarlet fever is today seldom admitted to hospital except for social conditions in which it would be inadvisable to nurse cases at home.

The present position with regard to notification of the disease is rather unsatisfactory and has been the subject of much comment in medical circles. In the present variety of fever, the rash is often transient or even absent, and other factors may well have to be considered before a diagnosis can be established.

Food Poisoning Outbreaks

No food poisoning outbreaks occurred during 1954.

Poliomyelitis

No case of poliomyelitis was notified throughout 1954. In this we can only count ourselves as fortunate for this disease certainly has presented many a problem to communities during the past twelve months. Intensive research is being carried on, especially on possible vaccines, to try to find a solution to the increasing prevalence of poliomyelitis. It is too early yet to say whether a really effective vaccine has been produced, but all reports show that there is real hope in this field which has brought so much suffering and disfigurement to many thousands of young adults and children. I think it is worth-while to repeat the warning I gave in my 1953 Report on the avoidance of over-tiredness in children, especially during the summer months. This is not an easy thing to accomplish, but the following signs and symptoms of strain should be carefully watched viz. fretfulness, lack of appetite, headache, sore throat, muscle pains, and, perhaps most important of all, inordinate disobedience. It is important to remember that by no means all cases of poliomyelitis are paralytic in type, but delay in getting medical advice may well prejudice the chances of preventing the onset of serious paralytic consequences.

Civil Defence

The training of ambulance personnel has now been undertaken by the Area Civil Defence Officer for the Central Area of Hampshire. There are at present nine people in the Ambulance Section for the district.

Care of the Aged

The following account is taken from the 6th Annual Report of the National Corporation for the Care of Old People:-

" Following their decision to turn their attention - and perhaps that of others - more towards the care of old people in their own homes, the Governors endeavoured through enquiry from many sources to discover the size of the problem and the main needs of old people. It was clear that conditions are not necessarily the same in every area, but it was felt that it should be possible to arrive at an assessment of the general position by detailed study of the actual conditions obtaining in certain selected places. After careful search the Municipal Borough of Andover in Hampshire was chosen for the first application of this test because it contains a good cross-section of the community and is sufficiently far from London to be outside its influence. It was also found that the proportion of old people in the total population was equal to the present national level of about 13.5 per cent.

As a first step, Miss B.L. Robertson, B.A. Oxon, A.M.I.A., was appointed to work in Andover and to visit the old people within the Borough boundaries and to collect such evidence as is required about the social services and the needs of the old people. Consideration was given to the possibility of a full scale survey of all old people by an outside team of investigators but this idea was dropped since it was felt that much would be gained by visits from a social worker known to the old people and because it would not be possible to combine both satisfactorily.

Quite apart from the visits which are carried out by the social worker with the full agreement of other organisations working in the same field, contact has been made with the national, hospital and county authorities who have been most helpful in making available all information possible to show the machinery of the various services for old people. This information makes it possible to view as a whole what is done for old people in the area and will facilitate the task of discovering whether there are gaps in the services which might be filled. Throughout the experiment, which may last for five years, careful records will be kept of the use of the existing services: and should it prove necessary the Corporation is prepared to take steps to assist in providing additional services, the effect of which will also be noted.

The Governors have undertaken this experiment in the belief that it will show the need for an even closer co-ordination of effort by all who are concerned with the care of the aged."

National Assistance Act, 1948 - Section 47

No formal action was taken under this Section in 1954.

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Vaccination and Immunisation

At December 31st, 1954, 160 persons had been vaccinated or re-vaccinated during the current year. Of these, 102 were infants under 1 year (225 babies were born in 1954.) Only 27 people were re-vaccinated. In 1952, the county rate for vaccination of babies born in that year varied greatly from place to place. The highest figure was a rural district of relatively high population while the lowest related to a small urban community. For the Borough of Andover the 1952 figure was 43.5%, for 1953 44.1%, and for 1954 46.2%.

In my opinion, this low estimate, although showing a very gradual improvement over the past 3 years, does not provide a safe "barrier of protection" for the community. The Chief Medical Officer of the Ministry of Health in his Report for 1952, states that "the total numbers of school-children re-vaccinated over the whole country suggest that not more than 1 in 25 of the children entering or leaving school who had been primarily vaccinated in infancy were re-vaccinated."

This dangerous position must not be perpetuated and local authorities, through advice in child welfare centres, instructions to health visitors and district nurses, publicity posters and leaflets, are doing all in their power to persuade people to use the services of general practitioners for this purpose. In this case, as in so many others, family practice and local authority, work together towards the one great ideal of community health - safety through prevention.

It is however, one of the defects in our present arrangements, that both immunisation and vaccination are not carried out in the same scheme. One of the basic reasons for the general acceptance of immunisation against diphtheria is the fact that multiple facilities are offered, e.g. clinics, schools, and family doctors.

The astonishing progress in the prevention of diphtheria has been well maintained. The provisional record of deaths for England and Wales in 1954 is 9 and 182 cases were notified. In 1944 there were 934 deaths and 23,199 notifications. These are remarkable figures and show a wonderful sense of public responsibility. Is it too much to hope that the public now feel that a child can not only "do with" immunisation, but in fact is "entitled" to his freedom from disease? I hope so, because it is only by sustained effort that we can improve even the present position. In 1954 in Andover 204 children completed a full course of primary immunisation and 47 children received "boosting" doses. The number of children receiving a primary course of injections has increased slightly, but the "booster dose" has been very poorly received. We have introduced a scheme into all schools in the area whereby reinforcing doses will be offered to entrants - and ages beyond when requested - as a part of the routine medical examination in schools. By these means, we hope to increase the effective barrier against diphtheria and, in particular cases, against whooping cough as well.

The position with regard to immunisation against whooping cough was very unsatisfactory in 1954, but now we hope that with the introduction of the combined vaccine throughout the county, a very much improved protection will be afforded against this disease. The great advantage of the combined vaccine is that protection against diphtheria as well as whooping cough can be obtained by the same course of injections. Multiple carrier protection is coming in to its own, and we can even give a triple protection to include tetanus as well as the other two diseases. The incidence of tetanus is low but nevertheless it is an extremely dangerous disease and this combination of safety is to be welcomed even in a relatively remote possibility.

Tuberculosis

In an Appendix to this Report you will find details of the cases of tuberculosis notified during the year and the present position of the Register. You will see that the number of respiratory cases has increased in both sexes, now giving a total of 102 as compared with 76 last year. The majority is accounted for by transfers of established cases into Enham Alamein, but it is in this field of respiratory tuberculosis where the largest increase occurs.

The more satisfactory position in bovine tuberculosis is due to the fact that the vast majority of milk now either comes from T.T. herds or at least is pasteurised. It has been well said that if we sought after the source of respiratory tuberculosis with the same enthusiasm which follows a notified case of diphtheria or smallpox, the situation would be vastly different. The truth is that there are always one or two contacts who escape the net of detection. This is not surprising considering how widespread the amount of contact a tuberculous adult has with the general population. In the case of an infant, it is very different where the immediate circle is likely to be very restricted to his own family and it is relatively easy to trace a potential victim or the actual source.

The number of deaths occurring from tuberculosis in England and Wales in 1954 was provisionally about 8,000, but notifications are still being received at the rate of over 800 per week. This is certainly an improvement in the last six or seven years, but there is no room for complacency in this picture. Even if tuberculosis no longer kills with the same intensity as in former days, it still takes an immense toll of the young life of the nation. The most minor attack of tuberculosis may still require

prolonged hospital treatment or at least absence from work, and this is something which is very vividly reflected in the standard of life of the afflicted family.

There are now 70 Mass X-ray Units operating in this country and approximately 15,000,000 people have been examined. Only 3.3 per 1,000 were discovered with active conditions. This is an extremely satisfactory result, but would be more so if the frequency of Mass-X-rays were very greatly increased and if the response of the public were even greater. The true picture in tuberculosis can never be fully assessed unless there is a 100 per cent response from the public to such diagnostic measures as miniature radiography.

The one really satisfactory result which has emerged since the operation of the National Health Service Act has been in the last two years the greatly diminishing waiting list for beds in sanatoria. This is now about half of what it was in 1952.

The role of housing is still large and vital and the priority which most Councils give in this respect to a tuberculous patient is well rewarded from the public health view point. The repercussions in health due to bad housing in this condition especially are very considerable.

There has been during the year an extension of BCG vaccination to older school children. Although this area is not included at present in the scheme, the trials already being carried out in parts of Hampshire may result in the wider application of the use of this vaccine, which has been used very widely abroad with success and growing confidence.

Administration of Health Services
National Health Service Act, 1946.

As noted in last year's Report, the Local Health Authority, that is the Council of the County of Southampton, has delegated to the Councils of the Borough of Andover, Andover Rural District, and Kingsclere and Whitchurch Rural District, certain of their functions with regard to:-

- (a) Care of Mothers and Young Children
- (b) Midwifery
- (c) Health Visiting
- (d) Home Nursing
- (e) Vaccination and Immunisation
- (f) Prevention of illness, care and after-care (except tuberculosis)
- (g) Home Help

The scheme came into operation on the 1st December, 1953, and the work of the Committee has gone ahead smoothly during the past year. I spoke last year of the executive powers of the body as being severely restricted. I think I can report in all fairness that there has recently been a relaxation of this restriction, and that more work is now coming before the Committee for decision. The present position is that reports are submitted to me from the County Nursing Superintendent, the Divisional Home Help Organiser, and previously, the Matron of the Drove Day Nursery, and these are presented as a consolidated report at the monthly meeting of the Committee. The Committee also has before it, information on infectious diseases, vital statistics, and all Sections of the functions under the National Health Service Act, 1946, which have been devolved.

It was decided at the District Health Sub-Committee meeting on the 16th December, 1954, that the staff of the Day Nursery be given notice terminating their appointment as at 31st March, 1955, and that the Nursery be closed from that date. This Nursery, which has been performing a useful function since 1944, was proving too uneconomic for the small numbers admitted during the year. In its place, the County Council decided that a child minders scheme could well meet the needs of the district. Up to the time of writing this Report, there has been very little call on the scheme.

The Home Help Service has increased its scope during the year and the following table gives a brief survey of the work carried out. The cases assisted include maternity, general sickness, child care, chronic sickness, aged sickness, aged infirm, tuberculosis and convalescent cases.

Home Help Service - 1954

	<u>Number of</u> <u>Applications received</u> <u>Total Assisted</u>		<u>Number of</u> <u>Cases</u> <u>Completed</u>	<u>Number of</u> <u>Helpers</u> <u>on Register</u>
Andover Municipal Borough	81	57	47	25
& Rural District				
Kingsclere & Whitechurch	78	54	51	30
Rural District				

The value of the Committee lies in the fact that it is composed of people who know and can interpret the needs of the communities which are served, and as such, should have a firm place in the administration of our health services.

Water Supplies

Public Supply

The Public Supply is derived from the borehole at the Council's Smannell Road Waterworks, and pumped to a covered reservoir of 500,000 gallons capacity at Bere Hill. The supply is continuous and no shortage has been experienced during the year.

Work on the extension of the Smannell Road Waterworks has proceeded during the year, additional pumps have now been installed, together with apparatus for removing free CO₂. It is anticipated that the electrical work holding up completion will be finished during the summer.

Main extensions have been put in hand to Smannell, Little London and Woodhouse, and will be completed shortly. Other mains extensions have been made in the Picket Twenty and to private enterprise housing development.

A scheme for water supply to the Andover Down, Picket Piece and Ox Drove area has been submitted to the Minister of Housing & Local Government

(a) Private Piped Supplies

1. Burfoot and Loveridge, Woodhouse.

Supplying 2 houses (also provides a supply to a bakehouse at Woodhouse.)

2. W. A. Motley, Harewood Farm, Andover Down.

Supplying 19 houses (also provides a supply to a garage with a camping site, a turkey farm and one dairy farm at Andover Down.)

b) Shallow Wells and Bores

A total of 104 dwelling houses within the Borough derive a supply of water for domestic purposes from shallow wells and bores, the water being raised by means of bucket and windlass in most cases and by hand pumping in the remainder. The decrease on the figures for 1953 is accounted for by the extension of the main supply to serve seven houses at Picket Twenty and the closure of two houses at Woodhouse.

The structure of dug wells is generally of a low standard and in some cases dangerous.

Nos. 8 & 9, Pitt Cottages, Woodhouse, were closed, but Nos. 6 & 7 are still provided with a supply of water for domestic purposes by the Council by means of a mobile tank as a temporary measure until the main is extended to this area.

10 samples of water were taken as the result of complaints or routine investigation, all of which were reported upon as satisfactory.

Water supplies to houses in the following areas were sampled in connection with special reports supporting the extension of the main supply:

Picket Piece and Ox Drove

Total number of properties in the area

(including 3 caravans on independent sites)

Number of persons - Adults	-	162	
Children	-	62	
	Total -		224

Source of Supply

Bores	-	17
Dug Wells	-	43
Rainwater	-	1

Means of Raising Water

By windlass and bucket	-	17
(Rainwater) bucket only	-	1
Hand pump	-	14
Electrically driven pump	-	25
Engine driven pump	-	4

Storage of Water

Inside house and piped to taps etc	-	27
Outside and piped to house	-	6
Not piped and without storage	-	27
Rainwater storage	-	1

Supplementary Rainwater Supply

Most properties have rainwater storage of some description.

Properties requiring Supply for Agricultural Purposes

Mixed Farms	-	4
Dairy Farms	-	1
Poultry Farms	-	7
Small Holdings	-	11

Total - 23

Byelaw Requirements

Except in the case of newly constructed bores all wells fall short of the requirements of the Building Byelaws as to the construction of the wells.

Sampling of Water

Reports - Satisfactory	-	34
Unsatisfactory	-	26
(Rainwater) Not sampled	-	1
Total	-	61

(c) Supplies to Dairies and Dairy Farms

The duty of ensuring that dairy farm premises are provided with a supply of water suitable for the requirements of the Milk and Dairies Regulations, 1949, passed to the Ministry of Agriculture and Fisheries on October 1st, 1949, but I am not aware that any regular sampling is carried out as was the practice under local authority control.

One dairy pasteurising milk derives its water supply from a bore on the premises and quarterly samples taken and submitted for bacteriological examination proved satisfactory.

Milk Supplies

There are nine persons registered as distributors of milk and eight premises registered as dairies within the Borough. The W.V.S. is registered as a distributor of cream for their Friday market.

The County Council delegated its powers in respect of the licensing and supervision of pasteurising plants to the Borough Council and licences issued under the Milk (Special Designation Pasteurised and Sterilised Milk) Regulations, 1949, are as follows:-

Dealers (Pasteurisers) Licences	-	4
Dealers (Sterilised) Licence	-	1
Dealers Pasteurised Milk Licences	-	3

Licences issued under the Milk (Special Designation) (Raw Milk) Regulations, 1949, are as follows:-

Dealers Tuberculin Tested Licences	-	4
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Supplementary Licences to use the special designations "Pasteurised" "Sterilised", and "Tuberculin Tested" were granted to an Eastleigh firm distributing milk to the Andover War Memorial Hospital.

Pasteurising Plants

There are four milk pasteurising plants in operation within the Borough, two plants of the Holder Type and two High Temperature Short Time installations.

The water supply for one plant is obtained from a bore hole on the premises and quarterly samples submitted to the Public Health Laboratory were all reported upon as being very satisfactory.

Sampling

Twenty three samples of bottled Tuberculin Tested Milk were taken for bacteriological examination during the year, four of which failed to satisfy the official test.

A total of one hundred and ninety-two samples were taken from plants during the year, all of which satisfied both the Phosphatase and Methylene Blue test with the exception that one failed the Phosphatase test.

Biological Examination

Four samples of raw T.T. Milk were submitted for biological examination and one sample was reported as positive Brucella Abortus.

Milk Bottle Cleansing

Three hundred and sixty-nine bottles were taken during the year for bacteriological examination, three hundred and one of which proved satisfactory, thirty fairly satisfactory and thirty-eight unsatisfactory. In cases of unsatisfactory results the method of cleansing is checked and advice given.

Public Services

Public Cleansing

The disposal of house refuse by tipping has continued to be a problem owing to the difficulty of access to the Penton Tip which was partially flooded again during the winter.

Alternative tips have been utilised at Enham (Dole Farm Lane) and at Wildhern and contracts for the erection of the new incinerator at Barlows Lane Sewage Disposal Works have been approved.

A new street sweeping orderly vehicle has been tested and recommended for purchase during the next financial year.

Disinfection and Disinfestation

Articles requiring steam disinfection are dealt with at St. John's Hospital by arrangement. Disinfection of six premises was carried out after infectious diseases.

Disinfestation work was carried out at premises infested as follows:-

Flies	-	6
Fleas	-	3
Ants	-	10
Woodlice	-	1
Beetles	-	1
Cockroaches	-	1

A liquid insecticide and Gammaxene or D.D.T. powder is applied as found necessary.

32 wasps nests were destroyed at the request of householders.

No complaints of bed bugs were received.

Swimming Pools and Hot Baths

Borough Swimming Pool

Special attention is given to the purity of the water which is continually circulating at the rate of 13,800 gallons per hour, filtered and chlorinated. Chlorine residual tests are carried out daily and regular samples taken by Sanitary Inspectors during the swimming season all proved satisfactory. Reports on all samples are posted on the notice board at the pool and are noted with interest by the public.

The pool was closed in September, earlier than usual, owing the death of the Superintendent when it was decided not to reopen until the commencement of the 1955 season.

The Treasurer has supplied the following statistics for the year 1954:-

Bathers	12,227
Spectators	2,202
Hot bath Patrons	<u>1,328</u>
	<u>15,757</u>

There is also a pool at the Grammar School, the water being chlorinated by hand dosing according to the use of the pool. The County Education Authority have not yet taken steps to ensure that a proper filtration and chlorination plant is installed comparable with the Municipal Installation.

Regular samples are taken by Sanitary Inspectors in the swimming season 5 of which were satisfactory and 3 fairly satisfactory.

Rodent Control

(1) Statistics (year ended 31st December, 1954.)

No. of complaints received and dealt with	-	105	(103)
No. of premises surveyed and action taken	-	1229	(2286)
No. of premises treated	-	451	(417)

The total number of properties in the Borough at 31st December, 1954, was 4940. This included 67 agricultural properties.

(2) Organisation

A free service is provided to domestic premises. Business and Agricultural premises are treated on a cost of labour and materials basis.

Pest Control Exhibition

A Pest Control Exhibition was staged by the Ministry of Agriculture and Fisheries at the Guildhall in conjunction with the Andover Rural District Council from 5th - 10th July, and was visited by 4,200 persons. A special meeting of Food Traders was arranged and attended by 50 persons.

Organised parties of children from all the schools in the Borough attended the Exhibition and saw the films.

(3) Hampshire No. 1 Workable Area Committee

The Committee held quarterly meetings during the year, the Council being represented on each occasion. The object of the Committee is to achieve the co-ordination of the work of Rodent Control by the constituent Local Authorities.

The most important matter discussed was the withdrawal by the Hampshire Agricultural Executive Committee of the Rodent control Service to farmers which will impose a burden on some Rural Districts with large numbers of agricultural properties.

Sewerage and Sewage Disposal

Work has commenced on the South Street Outfall Sewer reconstruction as a measure to relieve surcharge in the central area sewers.

A scheme for sludge digestion has been submitted to the Minister of Housing and Local Government to improve sludge treatment and disposal arrangements at the main disposal works.

Sanitation

It will be seen from the General Statistics that there are 4,251 inhabited properties within the Borough. A total of 363 houses are not connected to the main sewerage system and of these 180 are provided with drainage to a cesspool or septic tank, 167 have pail closets and 16 chemical closets.

The increase on the 1953 figures in the number of properties connected to a cesspool or septic tank is accounted for by the erection of three new houses in unsewered parts of the Borough.

Three bucket closets were eliminated on closure of two houses and the demolition of one. Fifteen properties in the Town Area with pail closets twelve of which have waste water drainage to the sewer, remain to be dealt with.

The clearing of blocked drains and waterclosets is treated as a public health service and 140 of these were cleared forthwith by the out-door staff without charge. Repairs and improvements to drains and sanitary fittings were affected at 24 premises and 50 hydraulic and smoke tests were applied in connection with this work.

There is still urgent need for modern public sanitary conveniences in the Town and public parks and for the improvement of existing arrangements by the provision of proper washing facilities with hot water to meet present day requirements.

The extension of the sewer at Charlton village is an urgent matter and should receive further consideration by the Highways and Works Committee.

Improvements to the six Pollens Almshouses, Marlborough Street, are in progress which will result in the provision of separate water closets where previously only two were provided with access from the street.

Statutory Action - Care of Closets

Proceedings were taken against the occupier of a house for failing to cause the flushing apparatus to be kept supplied with water sufficient for flushing and to be properly protected against frost, contrary to the provisions of Section 51 of the Public Health Act, 1934.

The Magistrates found the facts proved but adjourned the case for 14 days in order to give the defendant an opportunity to comply.

The Defendant then requested the Council to carry out the work which at the adjourned hearing resulted in an absolute discharge on payment of court fees.

The number of post-war houses built by the Council to the 31st December, 1954, was 623. There were 170 houses built before the war making a total of 793 houses owned and administered by the Council.

During the year the Council have completed development of the Weyhill Road and Portway Close site: a total of 33 houses have been erected on this site. Harroway has also been completed during the year. The 26 houses erected there have made a total of 30 on the estate. The newest housing site, Bere Hill Crescent, has been commenced during the year and a total of 32 houses have been completed.

The housing of older people also received attention with the completion of the 12 bungalows and 4 semi bungalows on the Acre Path site. At the same time plans were being prepared for the further relief of housing need among old people by the provision of suitable accommodation in Suffolk Road on the same site as the new Old Peoples' Club. The new building, St. Ann's House, when completed will provide 41 dwellings of one bedroomed and two bedroomed types. This should greatly relieve the waiting list of 83 old people still not satisfactorily housed.

The Housing Committee have also co-operated with the Public Health Committee by rehousing the occupants of seven houses which were considered by that Committee to be unfit for human habitation. It is the Council's policy that these two Committees shall continue to work together in this manner in tackling the slum clearance scheme recently formulated.

The huts in Ashtree Road have now all been emptied, their occupants rehoused and the site cleared. It has been possible during the year to commence the rehousing of the occupants of the sub-standard houses Nos. 48 to 60, Adelaide Road which the Council have bought with a view to redevelopment as a whole.

Moveable Dwellings

(a) Sites for Moveable Dwellings

The site of Harewood Garage, London Road, was licenced for a further period of 12 months, and the licence amended to provide for 12 caravans to be stationed on the site instead of 6 as previously.

An application in respect of land at The Crescent, was granted for a period of 12 months to provide for 6 caravans to be stationed on the site.

(b) Moveable Dwellings

Applications for individual licences were granted in respect of eleven dwellings for a period of six months and one for twelve months.

One application was refused.

(c) Camping on Unlicensed Sites

The camping on the New Street sites was eliminated during the year, two families being rehoused by the Council, one family moved to a dwelling house, and three families were permitted to move to the Municipal Caravan Site, after providing suitable moveable dwellings.

The Council were concerned with the future use of this land and recommended that a compulsory purchase order be made under the provisions of Section 164 of the Public Health Act, 1875, and the Acquisition of Land (Authorisation Procedure) Act, 1946, and this matter was proceeding at the end of the year.

(d) Contravention of Section 269 of the Public Health Act, 1936.

Proceedings were taken against an owner in respect of the use of his land for camping purposes in excess of 42 days without a licence and against the occupiers of 3 moveable dwellings stationed on the land.

The owner of the land was fined £5. and the three occupiers £1. each.

(e) Municipal Camping Site

The responsibility for the management of this site was transferred from the Public Health Committee to the Housing Committee at the end of the year with the Housing Manager as authorised officer and to be responsible for rent collection.

The number of caravans was limited to sixteen having regard to the facilities provided at present.

Atmospheric Pollution

There were no complaints regarding pollution or nuisance from the emission of smoke and/or grit from factory chimneys and it would appear that plant users are getting the right kind of fuel and using it to advantage in accordance with advice given by the Technical Officers of the Ministry of Fuel and Power during 1953, also, the largest Laundry in the town went over to oil fuel during the year and this eliminated the source of a serious grit nuisance in the central area.

The gas works continue to create pollution on the discharge of the retorts.

Meat and Meat Inspection

Slaughtering

Slaughtering continued to be carried out under the control of the Ministry of Food at the requisitioned Slaughterhouse in Southend Road, until the 1st July, 1954.

A sub-committee of the Council considered the question of slaughtering generally and after hearing interested bodies recommended that a public slaughterhouse ought to be provided under the Council's management.

The lease of the existing Slaughterhouse was surrendered by the Ministry and taken over by the Council, equipment taken at valuation and tolls fixed. Tenders were put out for the slaughtering rights and after negotiations a local butchers' tender was accepted to run for one year in the first instant.

The Slaughterhouse is recognised by the Ministry of Food as a Deadweight Certification Centre for pigs under the Fat Stock Guarantee Scheme and the Council's Sanitary Inspectors act as certification officers.

Inspection

100% inspection of all animals slaughtered was carried out and this entailed 398 visits and working a great number of hours beyond normal during the year, apart from Sunday slaughtering during the peak periods. It was found that Sunday slaughtering and overtime increased after control ceased due to irregular slaughtering and the demands of private enterprise.

Disposal of Condemned Meat

The difficulty envisaged regarding the disposal of condemned meat after control fortunately did not materialise. Voluntary surrender of all meat and offal found to be unfit for human consumption is obtained and a certificate given to the owner.

All unfit meat and offal is weighed and immediately removed in special bins from the slaughterhouse to a separate fly proof condemned meat room from where it is taken by a reputable contractor who has entered into an undertaking to the effect that the meat and offal would be adequately processed in order to safeguard the public health.

All condemned meat and offal is severely mutilated and stained with a vegetable dye before it is permitted to be removed from the condemned meat room and a receipt obtained from the contractor.

Cysticercus Bovis

100% inspection of beef carcasses and offal for the detection of lesions is carried out and eleven cases were discovered during the year.

Cysticercus Bovis is the cystic stage of the tapeworm Taenia Saginata in man and was considered rare in this country until reports of cases were received during 1948.

Under the Ministry of Food control affected carcasses and offal were removed to Reading for cold storage for a period of 21 days at a temperature not exceeding 20°F. after which the meat was released for manufacturing purposes.

The procedure adopted at the Public Slaughterhouse is similar in so far as the treatment of the carcasses is concerned. This complies with Memo. ., Meat, but the carcass is labelled and a release certificate issued to the owner which permits the removal of the carcass at the expiration of the storage period. No difficulty has been experienced in this respect to date.

Cysticercus Bovis

The following table gives details of the animals affected which shows a reduction on the figures for 1953:-

Class of Animals

<u>Steers</u>	<u>Heifers</u>	<u>Cows</u>	<u>Total</u>
5	2	4	11

Percentage of the Total Number of Animals Slaughtered in Each Class

<u>Steers</u>	<u>Heifers</u>	<u>Cows</u>
.60%	.35%	.65%

Percentage of the Total Number of Cattle Slaughtered

.55%
.56% (1953)

Liver Fluke

The continued loss of liver by reason of fluke (*Distoma Hepaticum*) is still a matter for attention, 300 livers and 273 part livers of cattle, and 556 livers of sheep being condemned during the year 1954.

Premises Registered

Licences Issued

Food and Drugs Act, 1938 and also Parts v and vi of the Public Health (Meat) Regulations, 1924, and the Clean Food Byelaws. Ice-Cream (Heat Treatment) Regulations, 1947.

A total of 54 premises are registered under Section 14 of the Food and Drugs, Act, 1938 as follows:-

Manufacture and storage of ice-cream	-	3
Storage and sale of ice-cream	-	35
Manufacture of sausages	-	12
Manufacture of pies	-	2
Manufacture of pickles	-	1

Frequent inspections are made of all premises, whether registered or not, in order to ascertain that hygienic conditions are maintained and the legal requirements observed.

Notices reminding persons to keep their hands clean and particularly to always wash their hands after using the sanitary conveniences are posted in suitable positions on all premises.

Thirty samples of ice cream were submitted for bacteriological examination by the Methylene Blue reduction test at the Public Health Laboratory, Winchester, with the result that,

26 samples were placed in Provisional Grade 1

4 samples were placed in Provisional Grade 2

Game Dealers Licences

13 licences were in force at the end of the year.

Pet Animals Act, 1951

The above Act provides for the licensing of persons keeping pet shops subject to compliance with such conditions as may be specified in the licence. One licence only has been issued in respect of a shop selling goldfish and birds.

Rag Flock and Other Filling Materials Act, 1951.

Under this Act, certain premises wherein any of the filling materials prescribed in the Act are used for upholstery, stuffing or lining of bedding, toys, baby carriages etc., have to be registered with the Council. The only premises required to be registered are those used by Enham Industries, Enham Alamein, and these were inspected twice during the year.

The Slaughter of Animals Act, 1953 to 1954.

The above Acts provide for the humane and scientific slaughter of animals, the licensing of slaughtermen, and for purposes connected therewith, and covers the kinds of animals and types of instruments to be specified on the licence. 10 applications for licences were granted for a period of 12 months in each case. Action regarding contravention of the provisions of the Acts was not found necessary during the year.

The Temple-Cox and Cash captive bolt type humane killer is used at the controlled slaughterhouse, also a long arm Greener killer, which fires a bullet, is used on occasions for bulls and dangerous animals. Every endeavour is made to ensure that all animals are slaughtered without pain or suffering and demonstrations of the methods employed will always be given to anyone interested.

Knacker's Yard

The Knacker's Yard within the Borough situated at Andover Down continued to be licensed under the Food and Drugs Act, 1938 for periods of six months. These premises are also licensed by the Ministry of Food under the Knacker's Yard Order 1948. Byelaws made under Section 58 of the Food and Drugs Act, 1938 are in force within the Borough requiring the person licensed to keep and produce when required, records of animals brought into the yard and of manner in which these animals, and the different parts thereof, were disposed of.

The number and classes of animals dealt with at these premises are as follows:-

<u>Cattle excluding Cows</u>	<u>Cows</u>	<u>Calves</u>	<u>Horses</u>	<u>Ponies</u>
41	50	21	26	1

Watercress Beds

Watercress growing is classified as one of the industries of Andover and a fair number of persons of both sexes find regular and seasonal employment in its various branches.

The groups of beds in the Borough of Andover cover an area of approximately 12 acres and the produce finds its way to most of the large markets by rail and road.

Regular inspections of watercress beds are made to ensure that they are properly protected from pollution and routine samples of water and cress are taken and submitted for bacteriological examination. The standard of purity of the water aimed at is not less than that of drinking water. 12 samples of water were taken and reported upon as satisfactory.

Market Stalls and Street Traders

The Saturday street market continues and the number of stall-holders selling foodstuffs is as follows:-

Fruit and Greengrocery	-	6
Fish	-	1
Canned & pre-packed goods	-	1
Sweets	-	1

Nuisance from the litter angle and dumping of produce on the highway has increased and this matter should receive the attention of the appropriate Committee.

A standpipe is fixed in the Market Place so that traders can obtain water but the provision of adequate washing facilities with hot water, soap and towels is an urgent necessity in connection with the men's conveniences.

The number of Street Traders, other than stall-holders is as follows:-

Fruit and Greengrocery	-	4
Grocery & Provisions	-	1
Butchers	-	2
Fish	-	2
Ice-Cream	-	2

The Council have adopted byelaws with respect to the handling, wrapping etc. of food, and the sale of food in the open air, and these are of great assistance in maintaining hygienic conditions.

Borough Market

Sales by auction of poultry and rabbits (live and dressed) take place every Friday at the Borough Market, Bridge Street, and regular inspection is carried out before sale. 32 rabbits were found unfit for human consumption. An official Egg Grading and Packing Station is attached to this market and strict control is exercised over the storage and disposal of Egg Yolks from breakages.

Clean Food Campaign

No special campaign has been undertaken, but work is actively going on on an inspection and advisory basis.

Improvements to food premises were carried out as follows:-

Hotels	-	One kitchen reconditioned and hoods and extractor fan installed.
Provision & Grocery Shop	-	One closed down owing to prohibitive cost of improvements. New premises provided.
Butchers Shop	-	One preparation room reconditioned and provided with solid floor.
Bakeries	-	New ceiling provided in one bakehouse.

The number of food premises within the Borough is as follows:-

Butchers	-	12	General Stores	-	25
Grocers	-	12	Greengrocers	-	10
Bakehouses	-	6	Cafes & Restaurants-		15
Works Canteens	-	6	Dairies		8
Fish Friers		4	Wet Fishmongers		4
Ice Cream		38	Licensed Premises	-	37
School Kitchens		8	Slaughterhouses		
			(Private)		NIL
			(Public)		1

Distribution of Industry

The local office of the Ministry of Labour and National Service has supplied me with the following figures relating to the distribution of industry on the basis of the number of insured persons in the area.

<u>Industry Group</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
Agriculture and Fisheries	1,064	136	1,200
Building etc.	1,144	33	1,177
Distributive	554	622	1,176
Vehicle Manufacture and Repair	794	106	900
National and Local Government	697	134	831
Professional Services	168	503	671
Transport, Communications and Warehousing	575	65	640
Paper and Printing	292	119	411
Food, Drink and Tobacco	249	132	381
Wood and Wood Manufacturers	290	67	357
Engineering	215	17	232
Gas, Electric and Water	124	14	138
Insurance, etc.	71	37	108
Mining and Mining Products	34	3	37
Chemicals, etc.	18	4	22
Clothing	15	1	16
Metal Goods	8	-	8
Textiles	-	4	4
Amusements, laundry, hotel, domestic service and miscellaneous services.	331	1,264	1,595
Total	6,643	3,261	9,904

The area covered by the Andover Employment Exchange is defined by the following:-

From a point on the Hants/Wilts county boundary due East of Newton Tony, follow the boundary in a northerly direction to a point North of and including Facombe, due South to and including Facombe Wood, then East South East to but excluding Ashmansworth and Crux Easton. North East to but excluding Burghclere and Sydmonton. Due South to and including Litchfield and Whitchurch, but excluding Freefolk and Hunton. West South West to but excluding Wonston, including Egypt, North North West to a point North of but excluding Bullington, then South West to and including Barton Stacey. West to but excluding Chilbolton, including Wherwell, Saxley Farm and Grateley, then South West to the starting point of the county boundary.

Andover district compares very favourably with the country as a whole, as far as employment is concerned. The local figure is 0.9% against the nation's 1.3%.

Shops Acts

Shops Act, 1950

This Act consolidates the Shops Acts, 1912 to 1938, and came into force on the 1st October, 1950.

Routine inspections are carried out covering the following matters:-

- (a) Provision of washing facilities and sanitary accommodation;
- (b) Provision of lighting and heating;
- (c) Facilities for taking meals;
- (d) Closing of shops on weekly half-holidays;
- (e) Evening closing;
- (f) Assistants weekly half-holidays and meal intervals;
- (g) Conditions of employment of young persons under 18 years of age;
- (h) Sunday trading.

The Chief Sanitary Inspector holds the Statutory appointment as Shops Act Inspector for the purpose of enforcing the provisions of the Act relating to (c) (d) (e) (f) (g) and (h) above.

InspectionsAPPENDIX 'A'

The following table shows the number and nature of the inspections carried out during the year:-

Houses (H.A. and P.H.A. 1936)	343
Overcrowding	11
Drains and Sanitary Fittings	57
Water Supplies	64
Slaughterhouse and Knacker's Yard	398
Dairies and Pasteurising Plants	217
Food and Ice-Cream Premises	336
Unsound Food	114
Shops (Section 38)	15
Bakehouses, Factories, Workplaces and Outworkers	48
Public Conveniences (Including Inns)	55
Watercress Beds	12
Swimming Pools	5
Moveable Dwellings and Caravan Sites	110
Market Stalls	180
Nuisances from:-	
Smell	7
Smoke	1
Infested Premises:-	
Fleas	5
Moths	10
Rats and Mice	597
Cockroaches	2
Infectious Diseases	11
Disinfections	6
Miscellaneous	16

TOTAL

2620

Notices Served

1. Informal Notices

Housing Defects	41
Nuisance from Rubbish	2
Absence of Water Supply	5
Drains and Sanitary Fittings	<u>24</u>
	<u>72</u>

2. Defects Remedied after Service of Informal Notices

Housing Defects	22
Nuisance from Rubbish	4
Absence of Water Supply	5
Drains and Sanitary Fittings	<u>20</u>
	<u>51</u>

3. Statutory Notices

Housing Defects	8
Drains and Sanitary Fittings	<u>1</u>
	<u>9</u>

4. Statutory Notices Complied

Housing Defects	8
Drains and Sanitary Fittings	1
Nuisance from Rubbish	<u>4</u>
	<u>13</u>

Slum Clearance

APPENDIX 'C'

Clearance Areas and Individual Unfit Houses

Action taken under the Public Health and Housing Acts

Clearance Areas (Housing Act, 1936)

	<u>Number of</u>		<u>Number of</u>
	<u>Houses Demolished</u>	<u>Unfit Houses Other Houses</u>	<u>Persons Displaced</u>
Land coloured "pink"	7	Nil	18
Land coloured "grey"	Nil	Nil	Nil

The above return refers to the last of the houses included in pre-war clearance areas to be demolished.

Housing Information

1. The number of houses which on inspection were considered to be unfit for human habitation	-	131
2. The number of houses the defects in which were remedied in consequence of informal action by the Local Authority or their Officers	-	51
3. The number of representations made to the Local Authority with a view to:-		
(a) the serving of notices requiring the execution of works, or	-	9
(b) the making of demolition or closing orders	-	11
4. The number of notices served requiring the execution of works	-	8
5. The number of houses which were rendered fit after service of formal notices	-	7

COMPLAINTS

The following is a list of the complaints received during the year and gives a good idea of the variety and amount of work involved:-

Housing defects	29
Blocked drains	140
Defective drains and sanitary appliances	24
Contaminated water	4
Unsound food	7
Emptying of dustbins	2
Trees obstructing light	3
Nuisance from:-	
Smoke	4
Rubbish	1
Smells	4
Animals	4
Infested premises:-	
Flies	6
Fleas	3
Ants	10
Woodlice	1
Wasps	32
Beetles	1
Cockroaches	1
<u>TOTAL</u>	<u>276</u>

Meat Inspection

APPENDIX 'E' (i)

Carcases Inspected and Condemed

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	1267	715	499	4867	4400
Number inspected	1267	715	499	4867	4400
All diseases except Tuberculosis Whole carcasses condemned	2	9	9	15	27
Carcases of which some part or organ was condemned	548	465	20	1391	847
Percentage of the number inspected affected with diseases other than Tuberculosis	43.4%	66.2%	5.8%	28.8%	19.8%
Tuberculosis only Whole carcasses condemned	3	10	1	-	7
Carcases of which some part or organ was condemned	171	199	-	-	95
Percentage of the number inspected affected with Tuberculosis	13.7%	29.2%	.2%	-	2.3%

Weight of Meat and Organs Condemed

	Tuberculosis			Other diseases		
	cwts.	qrs.	lbs.	cwts.	qrs.	lbs.
Carcases and parts of carcasses	105	3	18	79	3	16
Organs	66	1	13	151	3	6
TOTAL	172	1	3	231	2	22

Total weight: 20 tons. 3 cwts. 3 qrts. 25 lbs.

Condemnation certificates were issued in respect of the following food voluntarily surrendered by private traders:-

Weight in lbs.

Sprats	-	98
Meat	-	40
Ham	-	36
Cheese	-	37
Cereal	-	20
Prunes	-	5
Sausages	-	6
Biscuits	-	16
Cabbage	-	1440
Corned Beef	-	154
Total weight	-	1852 lbs.

Canned Food

Cans

Fruit	-	135
Beans	-	18
Ham	-	1
Soup	-	12
Fish	-	3
Peas	-	12
Marmalade	-	2
Mincemeat	-	2
Milk	-	78
Cream	-	154
Meat	-	44
Salmon	-	1
Syrup	-	7
Pickle	-	19
Coffee	-	1
Cereal	-	1
Total number of cans	-	490

Sundry other food stuffs were condemned including 32 rabbits and 4 packets of Swiss Rolls.

The disposal of this food is dealt with by the Borough Council, by deep burial on refuse tip.

Meat on Butchers' Premises

Home Killed Meat - 350 lbs.

Inspection of Factories

APPENDIX 'F'

Factories Acts, 1937 & 1948

1. Inspections for purposes of provisions as to health
(including inspections made by the Sanitary Inspector.)

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(1) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	16	4	-	-
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority	90	78	-	-
(3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises.)	5	5	1	-
Total	111	87	1	-

2. Cases in which defects were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			By H.M. Inspector	By H.M. Inspector	
Lack of cleanliness (S1)	-	-	-	-	-
Overcrowding (S2)	-	-	-	-	-
Unreasonable temperature(S3)	-	-	-	-	-
Inadequate ventilation (S4)	-	-	-	-	-
Ineffective drainage of floors (S6)	-	-	-	-	-
<u>Sanitary Conveniences (S7)</u>					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	1	1	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
Total	1	1	-	-	-

Tuberculosis

<u>Age Periods</u>	<u>New Cases and Transfers</u>						<u>Deaths</u>					
	<u>Respiratory</u>			<u>Non-Respiratory</u>			<u>Respiratory</u>			<u>Non-Respiratory</u>		
	<u>M</u>	<u>F</u>	<u>Total</u>	<u>M</u>	<u>F</u>	<u>Total</u>	<u>M</u>	<u>F</u>	<u>Total</u>	<u>M</u>	<u>F</u>	<u>Total</u>
0 -												
1 -				1		1						
5 -												
15 -	1	1	2	2	1	3						
25 -	4	5	9		1	1						
35 -	1	1	2									
45 -	1		1				1		1			
55 -				1		1						
65 and upwards												
<u>TOTAL</u>	7	7	14	4	2	6	1		1			

Number of Cases on the Tuberculosis Register on 31st December, 1954.
(31st December, 1953, in brackets.)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Respiratory	73 (53)	29 (23)	102 (76)
Non- Respiratory	5 (2)	7 (6)	12 (8)
<u>TOTAL</u>	78 (55)	36 (29)	114 (84)

During the year the number of cases on the Tuberculosis Register has increased by 30, as shown in the second table. There were 11 new cases, 9 transfers from other districts, and 1 death as shown in the first table. In addition, 1 case was replaced on the Register after returning to this district.

After checking the Register with the Andover Chest Clinic, the balance is made up as follows:-

Additions to
Register

21

Deductions from
Register

1 death from other causes
 9 moved from district
 1 recovered

Prevalence of and Control Over Infectious and Other Diseases

Final numbers according to Sex and Age after corrections of cases of Infectious and other notifiable diseases notified during the year ended 31st December, 1954:-

	<u>Scarlet Fever</u>			<u>Whooping Cough</u>			<u>Measles</u>		
	<u>M</u>	<u>F</u>	<u>Total</u>	<u>M</u>	<u>F</u>	<u>Total</u>	<u>M</u>	<u>F</u>	<u>Total</u>
Under 1 year				1		1			
1 - 2 years				3	8	11			
3 - 4 years	2		2	5	5	10	2		2
5 - 9 years	1	2	3	4	10	14			
10 -14 years									
15 -24 years									
25 and over									
Age Unknown									
TOTAL (ALL AGES)	3	2	5	13	23	36	2		2

	<u>Acute Pneumonia</u>			<u>Dysentery</u>		
	<u>M</u>	<u>F</u>	<u>Total</u>	<u>M</u>	<u>F</u>	<u>Total</u>
Under 5 years						
5 -14 years				1		1
15 -44 years		2	2			
45 -64 years				1		1
65 and over						
Age Unknown						
TOTAL (ALL AGES)		2	2	2		2

Puerperal Pyrexia - 2

Table of Deaths

APPENDIX 'I'

Tuberculosis, respiratory	1	(1)	0	(0)	1	(1)
Tuberculosis, other	0	(0)	1	(0)	1	(0)
Syphilitic Disease	0	(1)	0	(0)	0	(1)
Diphtheria	0	(0)	0	(0)	0	(0)
Whooping Cough	0	(0)	1	(0)	1	(0)
Meningococcal infections	0	(0)	0	(0)	0	(0)
Acute poliomyelitis	0	(0)	0	(0)	0	(0)
Measles	0	(0)	0	(0)	0	(0)
Other infective and parasitic diseases	0	(0)	0	(0)	0	(0)
Malignant neoplasm, stomach	2	(3)	0	(1)	2	(4)
Malignant neoplasm, lung, bronchus	2	(4)	2	(0)	4	(4)
Malignant neoplasm, breast	0	(0)	2	(6)	2	(6)
Malignant neoplasm, uterus	0	(0)	0	(1)	0	(1)
Other malignant and lymphatic neoplasms	6	(14)	8	(6)	14	(20)
Leukaemia, aleukaemia	0	(1)	1	(1)	1	(2)
Diabetes	0	(1)	1	(0)	1	(1)
Vascular lesions of nervous system	6	(16)	15	(9)	21	(25)
Coronary disease, angina	21	(17)	2	(5)	23	(22)
Hypertension with heart disease	1	(0)	3	(2)	4	(2)
Other heart disease	21	(17)	22	(26)	43	(43)
Other circulatory disease	0	(6)	3	(4)	3	(10)
Influenza	0	(0)	0	(1)	0	(1)
Pneumonia	1	(1)	2	(1)	3	(2)
Bronchitis	4	(3)	2	(2)	6	(5)
Other diseases of respiratory system	1	(1)	0	(1)	1	(2)
Ulcer of stomach and duodenum	3	(3)	0	(0)	3	(3)
Gastritis, enteritis, and diarrhoea	0	(1)	0	(1)	0	(2)
Nephritis and nephrosis	2	(1)	1	(1)	3	(2)
Hyperplasia of prostate	2	(1)	0	(0)	2	(1)
Pregnancy, childbirth, abortion	0	(0)	0	(0)	0	(0)
Congenital malformations	2	(0)	0	(0)	2	(0)
Other defined and ill-defined diseases	10	(8)	20	(14)	30	(22)
Motor vehicle accidents	2	(2)	0	(1)	2	(3)
All other accidents	2	(3)	0	(2)	2	(5)
Suicide	0	(0)	0	(0)	0	(0)
Homicide and operations of war	0	(0)	0	(0)	0	(0)
All causes	89	(105)	86	(85)	175	(190)

Diphtheria ImmunisationAnnual Return for Year ended 31st December, 1954.

Age

at date of final injection (as regards A)
or of reinforcing injection (as regards B)

	Under 1	1	2	3	4	5-9	10-14	<u>TOTAL</u>
Number of children completing full course of primary immunisation.	36	134	25	3	6			204
Number of children receiving reinforcing injection.						47	-	47

Immunisation in Relation to Child Population

Number of children at 31st December, 1954, who had completed a course of immunisation at any time before that date (i.e. at any time since 1st January, 1940)

	Under 1 1954	1 - 4 1953-1950	5 - 9 1949-1945	10 - 14 1944-1940	Under 15 <u>TOTAL</u>
Number at 31.12.54.					
Number in Year					
Number completing full course of injections (whether primary or booster)					
1950 - 1954.	39	666	469	196	1,370
1949 or earlier.			280	27	307

Vaccination Return for the Year ended 31st December, 1954.

<u>Number Vaccinated</u>	Under 1	1	2 - 4	5 - 14	15 or over	<u>TOTAL</u>
From 1st January-30th June	50	2	1	6	7	66
From 1st July-31st December	52	3	2	5	5	67
<u>Number Re-Vaccinated</u>						
From 1st January-30th June	-	-	1	3	13	17
From 1st July-31st December	-	-	-	6	4	10

County Health ServicesHealth Visitors

Miss M. L. Collins
Miss N. White
Miss D. D. Woodcock

District Nurse/Midwives

Miss E. M. Ford, S.R.N., S.C.M.
Miss B. M. Jones, S.R.N., S.C.M., Q.N.
Miss E. F. Tribbeck, S.C.M.
Miss M. E. Tribbeck, S.R.N., S.C.M., Q.N.
Mrs. P. A. Smith, S.R.N., S.C.M., Q.N.

Andover Health Centre, Junction Road, Andover.Clinics

Ante-Natal Clinic	2nd & 4th Mondays	2.0 p.m.
Child Guidance Clinic	By appointment only	
Child Welfare Clinic	Thursdays 9.30 a.m.	2.0 p.m.
Dental Clinic	By appointment only	
Eye Clinic	By appointment only	
School Clinic	Wednesdays 9.30 a.m.	
Orthopaedic Surgeon's Clinic	4th Tuesday	1.30 p.m.
Orthopaedic Remedial Clinic	Fridays 9.30 a.m.	1.30 p.m.
Speech Clinic	By appointment only	
Toddlers Clinic	By appointment only	
Tuberculosis Clinic	Wednesdays 10.0 a.m.	2.0 p.m.
